PART B – FEES(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block) for any change address) 27160 7590 10/13/2005 Patent Administrator KATTEN MUCHIN ROSENMAN, LLP 525 West Monroe Street Chicago, IL 60661-3693					s) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee Transmittal is being deposited with the U.S. Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 745-4000, on the date indicated below.			
							(Depositor's name)	
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:1501 1400.00 DA				,			(Date)	
1504 APPLICATION NO. DA	APPLICATION NO. DA FILINO		NG DATE		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/045,035	10/045,035 01/15/2002		Narayan Raghunath		hunathan	DC01 (213202.00359) 41341 213202.00359	7842	
TITLE OF INVENTION: MULT	TI-LÉVEL S	STACKING (CONTAIN	IER			•	
APPLN. TYPE	SMALL	ENTITY	IS	SUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	N	0	, ·	\$1400	\$300	\$1700	01/13/2006	
EXAMINER			ART UNIT		CLASS-SUB	CLASS	•	
CASTELLANO, STEPHEN J		3727		206-505000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer No. is required.			names of up to 3 agents OR, altern (having as a men and the names of	ng on the patent front page, (1) list the to 3 registered patent attorneys or alternatively, (2) the name of a single firm member a registered attorney or agent) as of up to 2 registered patent attorneys no name is listed, no name will be				
37 CFR 3.11. Completion of this	gnee is identific	ed below, no ass	signee data v		-		peen filed for recordation as set forth	
(A) NAME OF ASSIGNEE					(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
NORSEMAN PLASTICS, LIMITED					Ontario, CANADA			
Please check the appropriate as	ssignee catego	ry/categories (wi	ill not be prin	ited on the patent)	□ individual 🗷 corpor	ation/other private group entity	government	
4a. The following fee(s) are enclosed: ☑ Issue Fee				4b. Payment of Fee(s) ☐ A check in the amount of the fee(s) is enclosed				
Publication Fee					☐ Payment by credit card. A Credit Card Authorization Form is being filed herewith.			
☐ Advance Order - # of Copies					The Director is here to Deposit Account Num		red fee(s), or credit any overpayment,	
5. Change in Entity Status (fro	om status indi	cated above)			to Deposit Account Num	DEI 30-1710		
a. Applicant claims SMALL E	NTITY STATU	S. See 37 CFR	1.27.	☐ b. Applicant is	no longer claiming SMALI	ENTITY status. See 37 CFR 1.2	78(g)(2)	
		ly the Issue Fee				paid Issue Fee to the application istered attorney or agent; or the a	identified above. ssignee or other party in interest as	
	lication Fee (if							

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